

68-SAR-CKB

State Inst - St Pete

SECOND ANNUAL REPORT

OF THE

BOARD OF TRUSTEES AND OFFICERS

OF THE

MINNESOTA HOSPITAL FOR INSANE,

TO THE GOVERNOR OF THE STATE OF MINNESOTA,

FOR THE YEAR 1868.

PRINTED BY AUTHORITY.

**SAINT PAUL
PRESS PRINTING COMPANY.**

1869.

MINNESOTA HOSPITAL FOR INSANE.

BOARD OF TRUSTEES.

C. T. BROWN, St. Peter, *President.*
REV. A. H. KERR, St. Peter, *Secretary.*
LUKE MILLER, M. D., Rushford.
SOLOMON BLOOD, M. D., Owatonna.
RUBEN BUTTERS, Kasota.
H. B. STRAIT, Shakopee.
WM. SCHIMMEL, St. Peter.
A. H. KERR, *Treasurer.*

RESIDENT OFFICERS.

CYRUS K. BARTLETT, M. D.,
Superintendent and Physician.

JACOB E. BOWERS, M. D.,
Assistant Physician.

GEORGE W. DRYER,
Steward.

MRS. MARY L. PEXTON,
Matron.

REPORT.

His Excellency, W. R. Marshall, Governor of the State of Minnesota :

We herewith forward our Second Annual Report as Trustees of the Minnesota Hospital for the Insane, for the year ending November 30th, 1868.

It has been our earnest desire and effort to secure adequate provision for this most unfortunate class of sufferers, but with each additional increase of accommodations, we have found the number of applicants augmented to our fullest capacity. We had hoped to have a portion of the Hospital proper ready for the reception of patients by the close of this year, but in this we are disappointed, as will appear from the Report of the Building Committee. From the acting superintendent's report you will notice that 131 patients have been treated here, besides defraying the expenses of those still remaining in the Iowa Hospital and the St. Vincent's Institute, St. Louis. The Board felt unwilling to add to our temporary buildings, since the expense of erecting or fitting up, heating and culinary arrangements were so heavy, and especially as no provision had been made by the Legislature for such additional expenditure, but the Building Committee were instructed to devise additional accommodations, if practicable, without too large an outlay. After various plans proposed, it was decided to build an office twenty by thirty between the buildings now occupied, so that twelve or thirteen more female patients could be accommodated. This will meet the wants of this sex. A stone building, directly opposite, has been rented, and in a few days will be ready and furnished, so that we can receive twenty or twenty-five more male patients. This

building will be used as dormitories for the milder and more docile cases. They will take their meals in the common dining rooms, and when desirable will spend the day in the common day rooms. This arrangement rolls additional cares upon the officers and attendants, but it enables us to meet the demand upon us at far less rates than could possibly be secured in any other way. Besides, all patients are thus under the care of our medical officers. We trust that now all cases demanding hospital treatment can be provided for. Soon we will have 140 or 150 patients here, besides those sustained at other institutions. It is therefore evident that a much larger appropriation for current expenses will be really necessary. The following is our estimate for the ensuing year :

Support of patients here and those in St. Louis	
and Iowa, - - - -	\$41,500
For furnishing new Hospital, - - - -	5,000
	<hr/>
	\$46,500

This amount we regard as necessary to meet the expenses of the year without involving us in debt.

Such being the pressure upon us as to the number of patients, and since in our temporary buildings we are subject to many and serious inconveniences, and especially our inability (for want of room) to classify—so essential to successful treatment—the case rises to a most pressing and absolute necessity that the buildings now in process of erection be hastened to completion at an early day. They are now in such a condition that the Section and Return can be ready for occupancy early in the summer, and one sex of patients accommodated there during the warm weather.

For the completion of this Section and Return, the Laundry buildings, Engine-house and Carpenter shop, for engines, fan, excavation of air ducts, steam-heating apparatus, plumbing, plastering, drainage, water, cooking range, painting, plastering, &c., &c., the Board estimate that \$60,000 are needed. We feel confident that this amount will accom-

to finish these ends, and we earnestly urge, that to make these buildings available for patients, they must be finished and furnished with all necessary heating and ventilating arrangements.

The foundation of the central building is laid. The walls of this should go up the ensuing season. In this are the offices, kitchen, etc., for the entire buildings. Were the walls up, only a portion would need to be finished immediately. The importance, convenience and desirableness of the central building are most apparent, and really essential to the successful running of the Hospital. The estimate by our architect, for its completion, is \$56,000. For its erection the ensuing year, we earnestly ask an appropriation.

The Report of the Building Committee is herewith presented, which explains more fully the work already done.

The Report of the acting Superintendent, Dr. J. E. Bowers, is also forwarded, and attention is especially directed to those items of general interest and the necessities of the Hospital.

In the Treasurer's Report you will find the financial statements, showing the expenditures of both funds and the balances on hand.

The building which the Trustees have projected will be, when completed according to our plans, a beautiful, convenient and substantial one, admirably adapted for Hospital purposes, and an honor to our State. We feel that few locations, if any, can possibly combine more advantages for its erection. Excellent rock, in great abundance, is quarried a few hundred feet from the building; brick are burned on the farm; an abundant sand-bed is immediately in the rear of the site; hard wood is furnished from the neighboring mills; railroad and river communication are good. We are assured, too, that for the style and substantial character of the work few, if any, buildings will compare with this as to appearance, cheapness and durability. In all its appointments we desire to make it a first-class Hospital.

In the review of the year just closed we are reminded

that death, at any time, may blight our plans. Dr. Samuel E. Shantz, our first Superintendent, soon after his marriage and return from the East, was stricken down with disease, and after a few weeks of severe suffering, death ensued, August 20th. At the first meeting of the Board subsequent the following minute was passed, as also resolutions of condolence, which were forwarded to friends.

“WHEREAS, In the ordering of that Divine Providence whose ways we may not fathom, but whose appointments we are to recognize as infinitely wise, though often very dark, it has pleased Him in whose hands are the issues of life, to remove by death our esteemed and efficient Superintendent, the late Dr. Samuel E. Shantz. In his death we recognize a great public loss. In the prime of his life, with his energies and hopes identified with this institution from the beginning, and laboring with zeal in that specialty he had chosen for a life profession, he bid fair to take rank among those who have distinguished themselves in directing these great public charities. Called away just as the future looked so bright, with attachments and hopes making that future so promising, there is something inexpressibly sad in his removal. The best and most watchful attention—all that friendship, skill and care could do—were rendered, but in vain. It is ours to bow in reverence and bring home to our hearts the solemn lessons of this Providence.

“*Resolved*, That we, the Trustees of the Minnesota Hospital, bear record of our high appreciation of the late Dr. S. E. Shantz as Superintendent of this institution, and the fidelity with which he discharged his official duties.”

The selection of a successor now became our duty, and at a special meeting for this purpose, November 6th, Dr. Cyrus K. Bartlett, of the Northampton, Mass. Lunatic Asylum, was unanimously elected to the position of Superintendent. Dr. Bartlett comes with very high testimonials, as eminently qualified by large experience in hospital life, for this responsible office. He has signified his acceptance.*

* We expect his presence during the month of December, and we trust in time to add something to our Report.

After the death of Dr. Shantz, Dr. J. E. Bowers, Assistant Physician, has discharged the duties of Acting Superintendent; with great acceptance and commendable efficiency.

We earnestly commend this great public charity to the sympathy and fostering care of those to whom our State has committed the sacred trust of providing for this most unfortunate class of sufferers, and ask that prompt and efficient measures be taken to meet the pressing wants of this institution. All of which is most respectfully submitted.

C. T. BROWN,
LUKE MILLER,
SOLOMON BLOOD,
A. H. KERR,
R. BUTTERS,
H. B. STRAIT,
WM. SCHIMMEL,

Trustees.

BUILDING COMMITTEE'S REPORT.

To the Trustees Minnesota Hospital for Insane:

Your Building Committee herewith submit a brief report and also the expenditures under their direction during the fiscal year from Nov. 30th, 1867, to Nov. 30th, 1868.

By the action of the Board at the spring meeting, we were instructed to invite bids and place under contract any or all portions of the buildings designed to be erected during the year. Accordingly proposals were invited for all mason and carpenter work. Quite a number of bids were presented. Upon examination we found considerable difference in the estimates, but as none of them proposed to complete the buildings save at amounts far above our appropriations, the committee felt they could not accept. For example, we had estimates for the completion of the Section and Return, carpenter shop, laundry and engine house, as follows:

Mason work,	-	-	-	\$53,347 00
Carpenter work,	-	-	-	40,647 00
Plastering,	-	-	-	8,992 00

We refer to this bid as it embraced the completion of the above buildings by a responsible firm, but it required the building committee to furnish all the brick, all the stone quarried and dressed during the winter and to place all the lumber required, on the ground. It did not include drainage nor gas, nor heating apparatus, nor engines, nor plumbing nor water supply. All these included would make the buildings cost when completed over \$140,000. The committee had only \$70,000 appropriation, and they could not consistently make contracts that would involve so large a debt. We also had bids to do the mason work by full contract and also by the perch. We also had an estimate of the same by day labor. After full deliberation the committee decided as the wisest and most economical course to employ laborers, and a superintendent, thus insuring substantial

work, especially by this arrangement we would not be involved at the close of the year. And now in looking over the work we believe it could not have been done so well and thoroughly and at a lower cost by any contract proposed.

Brick was contracted for at \$6.25 per M. A contract was awarded to Snyder & Damren, the lowest bid, for carpenter work, at 11,902, all materials to be furnished. Hard wood lumber and pine were also purchased by contract. A portion of the stone cutting was done by contract. Whenever we could consistently make contracts, they were made.

During part of the summer we had great difficulty in securing stone cutters. The fall too was very unfavorable for prosecuting the work. The Section and Return are completed as to the masonry, and covered with a slate roof. During the winter all carpenter work will be done, ready for plastering early in the spring. We have our drainage pipes on the ground. Window protectors, glass, hardware, and other materials amounting to several thousand dollars. A large portion of the stone for the completion of the laundry, engine house, &c., is already quarried. Also a good proportion of the lumber requisite, all of which has been paid for. No debt is incurred.

The expenditures are presented in the schedule by the Treasurer amounting to \$77,478.62. It has been somewhat difficult to separate so that each item receive its proper amount. All bills and payments have been arranged under these different headings (which are thought to be sufficiently explicit) by the Treasurer. Each bill is numbered and filed in duplicate, one retained here, and the other placed in the State Auditor's Office.

We would earnestly urge the Board to secure the necessary appropriation to complete these buildings, so that a portion of the patients can be accommodated therein, early in the summer. It is all important also that the central building be erected as early as practicable, as the completeness of all arrangements are very much dependent on this. If the walls were up and enclosed, only the lower portion need be finished during the ensuing year.

We have given much time and attention to the work as it has progressed, and trust that it will be acceptable to the Board and all who carefully examine the style and substantial character thereof.

All of which is respectfully submitted,

C. T. BROWN,
A. H. KERR,
WM. SCHIMMEL,
Building Com.

TREASURER'S REPORT.

To the Trustees of the Minnesota Hospital for Insane:

The Treasurer respectfully submits the following statement of receipts and expenditures for the year ending Nov. 30th, 1868:

BUILDING FUND.

Receipts.

Dec, 1, 1867, Cash on hand, - -	- \$5,089 40
1868, Balance of appropriation of 1867,	6,436 27
Appropriation of 1868, - -	- 70,000 00
	\$81,525 67
Soft brick and stone sold, - -	- 48 60
Wood sold L. Ash, - - -	827 50
	-
Total receipts, - -	- \$82,401 77

Expenditures.

Stone and Quarry, - -	- \$2,113 39
Materials and Implements, - -	2,610 90
Mason Work, - - -	- 8,096 01
Stone Cutting, - - -	- 12,039 31
Laborers, - - -	- 6,522 42
Teamsters, - - -	- 2,270 82
Architect, - - -	- 1,500 00
Lime, - - -	- 1,305 90
Brick, - - -	- 5,727 16
Brick Masonry, - - -	- 2,340 97
Lumber, - - -	- 12,673 58
Hardware, - - -	5,042 27

HOSPITAL FOR INSANE.

15

Wood, - - - - -	1,486 07
Printing and Advertising - - -	139 63
Miscellaneous, - - - - -	943 80
Painting and Paints, - - - -	567 07
Well, - - - - -	209 24
Petty Account, (Treasurer's,) -	91 22
Slate Roof, (in part,) - - -	2,586 73
Blacksmithing, - - - - -	797 48
Carpenters, (on contract,) - -	7,300 00
Stone Building, (Temporary,) -	27 25
Frame Building, (Temporary,) -	881 27
Office Building, (Temporary,) -	206 13
<hr/>	
Total Expenditures, - - -	\$77,478 62
Cash to Balance, - - - - -	4,923 15
<hr/>	
	\$82,401 77

CURRENT EXPENSE FUND.

Receipts.

Appropriation for deficiency of last year, purchase of furniture, repairs, &c., -	\$6,000 00
Appropriation of 1868, - - - -	30,000 00
Cash from Private Patients, &c., - - -	1,096 16
Cash, Sundries sold by Steward - - -	59,42
<hr/>	
Total, - - - - -	\$37,155 58

Expenditures.

For Additions, Alterations and Repairs, -	689 33
For Attendants, Assistants and Labor, -	3,933 77
For Books, Stationery and Printing, - -	117 62
For Clothing for Patients - - - -	734 55
For Farm, Barn, Garden and Grounds, -	1,218 02
For Fuel, - - - - -	1,251 44
For Furniture, including Beds and Bedding, -	2,297 72
For Insurance, - - - - -	260 00
For Library and Amusements, - - - -	60 82
For Lights, - - - - -	72 28
For Medicine and Medical Supplies, - -	756 48
For Miscellaneous Expenses, - - - -	492 05
For Officers' Salaries, - - - - -	2,660 00
For Patients' Miscellaneous Expenses, -	134 50

For Provisions and Household Supplies,	-	10,622	01
For Support of Sundry Patients in Iowa Hospital,	-	603	79
For Support of Sundry Patients in St. Vincent's Institute,	-	1,945	72
For Steward's Petty Expenses,	-	386	51
For Cash to Building Fund on Loan of 1867,	-	3,000	00
For Cash in Steward's Hands,	-	13	49
		<u>\$31,250</u>	10
Cash on hand and in State Treasury,	-	5,905	48
		<u>\$37,155</u>	58

The above Schedule of Current Expenditures was furnished by the Steward.

A. H. KERR,
Treasurer.

The Committee on Finance respectfully report that they have examined the Books and Vouchers of the Treasurer, and find Vouchers in his hands for the following amounts, as per Schedule,	-	-	-	\$77,478	62
Amount in hands of Treasurer,	-	-	-	4,923	15
				<u>\$82,401</u>	77

Amount in hands of Treasurer from 1867,	11,525	67
Appropriations 1868,	70,000	00
Soft Brick and Stone sold,	48	60
Amount Received for Wood,	827	50

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

R. BUTTERS,
H. B. STRAIT,
Committee on Finance.

SECOND ANNUAL REPORT OF THE
SUPERINTENDENT
OF THE
MINNESOTA HOSPITAL FOR INSANE.

To the Board of Trustees:

GENTLEMEN:—Through a melancholy and unforeseen train of circumstances, it has become my duty to prepare for your consideration, a detailed account of the operations of this Institution during the past twelve months. Having been identified with the hospital for two-thirds only, of the official year just expired, I must rely principally on the records, and can only in part speak from personal experience.

To your Board, the following is respectfully submitted, as a medical and statistical report of the work done during the second year of its existence, and of the present status and future prospects of this, one of our noblest State charities. Every institution of this kind has, during its infancy, necessarily, many difficulties to encounter, which cramp its successful operation, and reminds us forcibly of the trite old adage, that "Rome was not built in a day;" nor do Hospitals for the Insane "spring out of the ground by the mere waving of an enchanter's wand."

It has been a matter of much regret to the officers of this Institution, as well as with your Board, that our accommodations have not been sufficiently ample to receive all the unfortunate of this class who have sought admission. I am sometimes favored with letters inquiring *why* certain parties

are not admitted when they have taken the steps required by law. They have invariably been assured that everything is being done that is practicable in the existing emergency.

	Male.	Female.	Total.
No. of patients remaining in the Hospital			
at the commencement of the year,	43	41	84
Received during the year,	22	25	47
<hr/>			
Whole No. under treatment during the			
year, - - - - -	65	66	131
Discharges, including deaths, -	10	13	23
<hr/>			
Remaining in the Hospital Nov. 30th,			
1868, - - - - -	55	53	108

Table of discharges, including deaths :

	Male.	Female.	Total.
Discharged, (recovered) - - -	3	5	8
“ (unimproved) - - -		1	1
Died, - - - - -	5	4	9
Not insane, - - - - -	1	2	3
Eloped, (improved) - - -		1	1
“ (unimproved) - - -	1		1
<hr/>			
	10	13	23

Table showing cause of death :

General Paralysis, - - -	2
Age and Exhaustion, - - -	2
Epilepsy, - - - - -	1
Typhoid Fever, - - - - -	4
<hr/>	
	9

From the Day Book it appears that the whole number of patients admitted during the first year the Institution was in operation, was 97, of whom 13 were discharged, leaving 84 at the commencement of the past year. Since then 47 have been admitted, making the whole number under treatment during the year, 131. Of these, 23 have been discharged, leaving now 108.

Connected with the table of discharges are several circumstances of interest. The small percentage of recoveries is due to the fact that the Hospital has, almost from its opening, been crowded with chronic insane and demented patients, whose prospect for recovery is almost *nil*. To prove this, I need only mention that of the 108 patients now remaining, there are perhaps not more than 30 who can be considered curable. Soon after the opening of the Institution, 19 chronic cases were brought home, in one batch, from the Iowa Hospital. Every one of these is still here, and all are life members. Besides those who had enjoyed hospital advantages, there were many throughout the State who were brought as soon as there was room. Some of these, according to the Case Book, had been ten, and some even twenty years insane.

Among the deaths was one that occurred only five, and another twenty-two days after admission. Both these were cases of typhoid fever. It may not be out of place here to insist on the necessity of a proper exercise of judgment and discrimination in those members of the profession who may be called on to give a certificate of insanity, before the patient can be admitted.

In many cases the friends, to the great detriment of the insane individual, keep him at home in the hopes that he may recover without hospital treatment; while others again go to the opposite extreme, mistake the delirium of fever for mental aberration, and hurry the patient, perhaps by a long and exhaustive journey, to the hospital; hence cases occur where the patients are *in articulo mortis* when they arrive. Such was the fact in the case of Peter A. An autopsy proved clearly that he died of typhoid fever. Among those set down as not insane, two were idiots, a boy and girl, who had been admitted under the original Act, which did not make the proper distinction. The boy was taken home by his father, and the girl, in conformity with a resolution passed by your Board, at the September session, was carried to the county whence she came. The third case, however, is the one to which I wish

specially to call your attention, as it is one of unusual interest.

Mrs. S. had been for years addicted to the vice of opium eating. She had become so attached to the noxious drug that she would resort to every possible expedient to procure an article which seemed to alleviate her sorrows but was dragging her daily down lower in the scale of humanity. She was pale, haggard and emaciated, with a woeful expression of countenance, but showing in her conversation unmistakable evidence of a good education, that she had seen better days, and was now but a wreck of her former self. A favorable indication in her case was that she appreciated her condition and was exceedingly anxious to escape from the vicious habit that had so insidiously drawn her into its vortex. As the only means of escape she sought an asylum here, first making application to be employed as an attendant; but this not being entertained by the Superintendent, her friends procured the necessary papers, and she was admitted as a patient. As it was not considered advisable to deprive her at once of her accustomed stimulus and narcotic, the tincture of Hyoscyamus was substituted for opium, and this was gradually withdrawn. The privation seemed at first to produce symptoms similar to those of opium poisoning, and on several occasions it was necessary to resort to the appropriate remedies to keep her alive. She soon improved in health and general appearance, and gave every assurance that she had no longer a desire for what had been the bane of her life and had caused her so much domestic infelicity and suffering. She was discharged in three months, and has so far successfully resisted the temptation. She is now one of our most reliable employees.

The sanitary condition of the institution has been satisfactory during the greater part of the year, with the exception of the months of August and September, when diarrhoea and dysentery were prevalent, and a number of cases of typhoid fever occurred. There was great cause for apprehending a serious epidemic outbreak, owing to the crowded condition of the house, and, I have no doubt, it was only

averted by the most stringent measures of cleanliness, and a regular system of disinfection by carbolic acid.

Overcrowding must naturally be detrimental to the patients, not only physically, but also mentally.

Classification in an Asylum is no less indispensable for the comfort and cure, than is classification of the sick in a general hospital. It would be unreasonable and inhuman to lodge in the same room, patients suffering from small pox, typhus fever, cholera, or some other serious disease, with those afflicted with ordinary and simple diseases. It is no less inhuman to huddle together in an Asylum devoid of the means of classification, a multitude of insane people, manifesting every imaginable form and degree of mental and moral alienation. Our facilities here are limited to making two classes of each sex. The result is that the quieter patients, and those proceeding to convalescence, are continually exposed to the more troublesome, as the violent, noisy, obscene and profane, epileptic, suicidal, the mischievous, &c., &c. But all these objections will be remedied when we get into our permanent buildings.

It is estimated by Dr. Tuke of the York Retreat, that of every ten lunatics admitted, five are discharged recovered, and five remain uncured; but of the five who recover only two remain permanently sane. This is a very unfavorable estimate, but taking the most favorable view, it is still evident the number of chronic insane is on the increase, not only in a ratio corresponding with the increase in the population; hence the necessity of making ample provision not only for acute cases as they occur, but also for the accumulating chronic cases.

Table Showing the Nativity of those Admitted During the Year.

	Males.	Females.	Total.
British America.....	1	...	1
Bavaria.....	...	2	2
Bohemia.....	1	...	1
Canada.....	1	...	1
Germany.....	2	2	4
Holland.....	...	1	1
Indiana.....	...	3	3
Ireland.....	4	1	5
England.....	1	...	1
Maine.....	...	2	2
New Hampshire.....	...	1	1
New York.....	3	3	6
Norway.....	5	3	8
Ohio.....	...	1	1
Pennsylvania.....	...	1	1
Prussia.....	...	1	1
Sweden.....	2	2	4
Virginia.....	...	1	1
Wisconsin.....	2	...	2
Hanover.....	...	1	1
	22	25	47

From the preceding table it will be seen that the forty-seven new patients admitted last year, represent twelve separate nationalities, and eight different States of the Union. Norway, New York State and Ireland being represented by the largest number. The fact that more Norwegians were admitted than any other nationality, does not show that Scandinavians are more liable to insanity than others. But it merely shows that the Scandinavian element exists largely in the State of Minnesota.

"How strange," said a gentleman to me the other day, "that the proportion of insane in this State, is so much greater than in any other. There must be something in the atmosphere that acts as an exciting cause." I tried to make him comprehend that he was in error with regard to the numerical proportion in this State as compared with other States, and that his premises being false his conclusion so derogatory to our pure and bracing atmosphere must necessarily fall to the ground.

In some of the older States, the proportion of the insane to the sane, is one in every 1,000. Hence, as it is asserted that the population of our State is 500,000; this would give us 500 insane people to support, but as near as can be ascertained there are not more than 150 in the State at present. It is a well known fact that many of the inhabitants came from other States, for the sake of their health. Some of these people have broken down constitutions, and when exposed to the hardships of western border life, their minds, as well as bodies, give way. We have at present several individuals here who came to the State for the good of their health.

Table showing the occupation of those admitted.

	Males.	Females.	Total.
Cabinet Maker.....	1	...	1
Domestic.....	...	1	1
Stone Mason.....	1	...	1
Farmer.....	11	...	11
House Keeper.....	...	23	23
Grain Merchant.....	1	...	1
Laborer.....	4	...	4
Mechanic.....	1	...	1
Marble Cutter.....	1	...	1
Student.....	1	...	1
Wagon Maker.....	1	...	1
Not ascertained.....	...	1	1
	22	25	47

Table showing the religious profession of those admitted.

	Males.	Females.	Total.
Baptist.....	1	5	6
Congregationalist.....	1	1	2
Episcopalian.....	...	1	1
Lutheran.....	6	10	16
Methodist.....	...	2	2
Romanist.....	7	4	11
Not Religious.....	7	2	9
	22	25	47

Table showing the form of insanity.

	Males.	Females.	Total.
Acute Mania.....	6	8	14
Sub-acute Mania.....	2	...	2
Chronic Mania.....	...	1	1
Melancholia.....	7	8	15
Dementia.....	5	7	12
Paresis Generalis.....	1	...	1
Not Insane.....	1	1	2
	22	25	47

Table showing the causes assigned.

	Males.	Females.	Total.
Intemperance.....	1	...	1
Sun stroke.....	...	1	1
Masturbation.....	3	...	3
Over-work and abuse.....	1	1	2
Over-work, and ill health.....	4	7	11
Exposure while in U. S. service.....	1	...	1
Exhaustion from travel.....	...	1	1
Traumatic Epilepsy.....	...	1	1
Injury to back.....	1	...	1
Disappointed affection.....	2	...	2
Change of life.....	...	1	1
Grief.....	...	1	1
Prolonged lactation.....	...	1	1
Epilepsy.....	...	2	2
Domestic trouble.....	1	1	2
Fear and anxiety.....	...	1	1
Not insane.....	1	1	2
Unascertained.....	7	6	13
	22	25	47

Table showing the ages of those admitted.

	Males.	Females.	Total.
From 10 to 20.....	1	2	3
From 20 to 30.....	7	7	14
From 30 to 40.....	10	3	13
From 40 to 50.....	4	5	9
From 50 to 60.....	...	2	2
	22	25	47

Table showing time insane before admission.

	Males.	Females.	Total.
Under three months.....	10	11	21
Under six months.....	4	2	6
Under one year.....	1	2	3
Under two years.....	1	1	2
Under five years.....	2	2	4
Over five years.....	1	2	3
Unknown.....	3	5	8
	22	25	47

Showing civil condition.

	Males.	Females.	Total.
Married.....	5	19	24
Single.....	15	3	18
Widowed.....	1	2	3
Divorced.....	1	1	2
	22	25	47

Table showing the hereditary tendency.

	Males.	Females.	Total.
Hereditary.....	2	9	11
Not hereditary.....	3	10	13
Uncertained.....	11	4	15
	22	25	47

In the table exhibiting the forms of insanity, it will be seen that the majority of the cases admitted during the year came under three heads—acute mania, melancholia, and dementia. Among the fourteen acute cases, the time from the development of the disease to their admission into the Hospital varied from four days to three months. Of these, four were discharged recovered; three in less than three months, and one in nine months. The prospects now

are that eventually nearly all these will recover—thus showing the propriety and necessity of early treatment, not only for the sake of the patients themselves, who may thus be restored as useful members of society, but also because by this means the State is spared the expense of supporting them for life. “It is a well established fact,” says Dr. Forbes Winslow, “that seventy, if not eighty, per cent. of the cases of insanity admit of speedy cure, if treated in the early stage, provided there be no strong constitutional predisposition to cerebral or mental afflictions; and even where an hereditary taint exists, derangement of mind generally yields to the steady and persevering administration of therapeutic agents, combined with judicious, moral measures, provided the first scintillations of the malady are fully recognized, and without loss of time grappled with by remedial treatment.”

Of the cases of melancholia, a large proportion were reported as suicidal—some of them having made repeated attempts at self-destruction, and indeed two of them were brought here with frightful gashes in their throats, the result of their attempts to escape from intolerable mental agony, in obedience to some invisible voice, or driven by an irresistible impulse to explore “that bourne whence no traveler returns.”

The cases of dementia belong to the primary and secondary kind—the latter having passed through some one or more of the phases of an acute character, either of mania or melancholia, and are now settling down into hopeless and helpless incurables. Some of these are inoffensive, while others are subject to occasional paroxysms of violence, making it necessary to isolate them from society.

It will be noticed that among the causes assigned, a lowered state of the physical health plays no inconsiderable part. Many of the patients are brought to the Hospital with debilitated constitutions. They are, so to speak, “crazy to their very finger ends,” making it necessary to direct the treatment more especially to the restoration of the bodily functions to a healthy standard. In many of these cases

as the physical health improves, improvement is seen in the mental condition.

Notwithstanding the crowded condition of the house, I do not remember that a single recent case was refused admission, when brought here, as will be seen from the large proportion of those who are put down as under three months insane. I was forced, however, to refuse some that were applied for by letter from counties where they could be cared for at all. The consequence has been, that a number have accumulated in St. Paul, Winona, Red Wing, &c., &c. I felt justified, under the existing circumstances, in making a selection from the cases presenting themselves, and as some of those brought here were chronic cases, I refused them in favor of the curable ones. A few patients were brought who had been insane for years and had been cared for at home, but had lately become more violent and unmanageable. Several others who were refused had been subject to epileptic fits. These are an anomalous class. We cannot benefit them, and very little can be done for them, except to take care of them. But from the paroxysmal fits of violence to which they are subject, from their general helplessness, liability to injuries from falling into the fire, and other accidents, they can evidently not be safely kept in private families. As soon as there is sufficient room all of this class will, no doubt, be received. So long as space is limited, it would be an egregious error to the curable insane to fill up the Hospital with chronic cases and a class who, it is admitted, cannot be cured, to the exclusion of those who might be, but would by this means be forced to become confirmed, on account of being denied proper treatment.

As a Board of Trustees you have been unremitting in your efforts to devise means to accommodate all who seek refuge in the institution for whose support the State has provided so liberally. It will be a satisfaction for the people to know that by the means you have now adopted to increase the capacity of the Hospital, our accommodations will be so much increased as to enable us to take in at least five more females and fifteen more male patients. By the

room thus made, and by the vacancies created by discharges, I have no doubt that the most urgent, if not all the cases existing, and of those arising during the winter, may be accorded the benefit of immediate treatment. In my correspondence with Judges of Probate, I cannot help noticing that there is some impatience throughout the State because so much money has been applied and still all the insane do not have the benefit of the Hospital. But the people should remember that it requires time as well as money to erect large buildings. That part of the permanent building now under way will be ready for occupation in the spring, or early part of the summer.

I would recommend your Board to impress upon the Legislature the propriety and necessity of furnishing you with the means to prosecute the erection of more of the permanent buildings. It is very desirable that the central building, and a wing and return, corresponding to one now put up, should be completed as early as possible, so that both the male and female department might be removed to more suitable and more safe quarters. Situated as we are in wooden buildings, principally, the officers have to live in continual apprehension of an outbreak of fire. You are aware that the want of facilities for exit from the female department would make it a very serious matter, if such an accident should occur, and many human lives might be sacrificed. This, among others, is a strong reason why the patients should be removed to a safer place as soon as possible.

I have noticed that the public at large have a very indefinite idea about the laws on the subject of insanity. It has long been felt that a serious deficiency has hitherto existed in the laws defining and regulating the rights and relations of the insane, and especially as regards their admission into and discharge from the hospitals. The following project of a general law, as finally adopted after much discussion of the subject, was endorsed by every member of the Association of Superintendents of American Institutions for the Insane, present at the last meeting, and may therefore be taken as an expression of the opinions of the most eminent

rights in the specialty and in the profession. It is to be hoped it will have its influence on the legislation of the different States on the subject of insanity :

PROJECT OF A LAW TO DETERMINE THE LEGAL RELATIONS
OF THE INSANE.

The Association of Medical Superintendents of American Institutions for the Insane, believing that certain relations of the insane should be regulated by statutory enactments calculated to secure their rights and also the rights of those entrusted with their care, or connected with them by ties of relation or friendship, as well as to promote the ends of justice and enforce the claims of an enlightened humanity, on this purpose recommend that the following legal provisions be adopted by every State whose existing laws do not already satisfactorily provide for these great ends.

1. Insane persons may be placed in a hospital for the insane by their legal guardians, or by their relatives or friends, where they have no guardians ; but never without the certificate of one or more reputable physicians, after a personal examination, made within one week of the date thereof ; and this certificate to be duly acknowledged before some magistrate or judicial officer, who shall certify to the genuineness of the signature and to the respectability of the signer.

2. Insane persons may be placed in a hospital, or other suitable place of detention, by order of a magistrate, who, after proper inquisition, shall find that such persons are at present and dangerous to themselves or others, or require hospital care and treatment, while the fact of their insanity may be certified by one or more reputable physicians, as provided in the preceding section.

3. Insane persons may be placed in a hospital, by order of a high judicial officer, after the following course of proceedings, viz : on statement, in writing, of any respectable person, that a certain person is insane, and that the welfare of himself, or of others, requires his restraint, it shall be the duty of the judge to appoint immediately a commission,

who shall inquire into and report upon the facts of the case. If, in their opinion, it is a suitable case for confinement, the judge shall issue his warrant for such disposition of the insane person as will secure the objects of the measure.

4. The commission provided for in the last section shall be composed of not less than three nor more than four persons, one of whom, at least, shall be a physician, and another a lawyer. In their inquisition they shall hear such evidence as may be offered touching the merits of the case, as well as the statements of the party complained of, or of his counsel. The party shall have seasonable notice of the proceedings, and the judge is authorized to have him placed in suitable custody while the inquisition is pending.

5. On a written statement being addressed, by some respectable person, to any high judicial officer, that a certain person, then confined in a hospital for the insane, is not insane, and is thus unjustly deprived of his liberty, the judge, at his discretion, shall appoint a commission of not less than three nor more than four persons, one of whom, at least, shall be a physician, and another a lawyer, who shall hear such evidence as may be offered touching the merits of the case, and, without summoning the party to meet them, shall have a personal interview with him, so managed as to prevent him, if possible, from suspecting its objects. They shall report their proceedings to the judge, and if, in their opinion, the party is not insane, the judge shall issue an order for his discharge.

6. If the officers of any hospital shall wish for a judicial examination of a person in their charge, such examination shall be had in the manner provided in the fifth section.

7. The commission provided for in the fifth section shall not be repeated, in regard to the same party, oftener than once in six months; and in regard to those placed in a hospital under the third section, such commission shall not be appointed within the first six months of their residence therein.

8. Persons placed in a hospital under the first section of this act may be removed therefrom by the party who placed them in it.

10. Persons placed in a hospital under the second section of this act, may be discharged by the authorities in whom the government of the hospital is vested.

11. All persons whose legal status is that of paupers, may be placed in a hospital for the insane by the municipal authorities who have charge of them, and may be removed by the same authority, the fact of insanity being established in the first section.

12. On statement, in writing, to any high judicial officer, or some friend of the party, that a certain party placed in a hospital under the third section, is losing his bodily health, and that consequently his welfare would be promoted by his discharge, or that his mental disease has so far changed its character as to render his further confinement unnecessary, the judge shall make suitable inquiry into the merits of the case, and according to its result, may or may not, order the discharge of the party.

13. Persons placed in any hospital for the insane, may be removed therefrom by parties who have become responsible for the payment of their expenses, provided that such obligation was the result of their own free act and accord, and not of the operation of law, and that its terms require the removal of the patient in order to avoid further responsibility.

14. Insane persons shall not be made responsible for criminal acts in a criminal suit, unless such acts shall be proved not to have been the result, directly or indirectly, of insanity.

15. Insane persons shall not be tried for any criminal act during the existence of their insanity; and for settling this question one of the judges of the court by which the party is to be tried shall appoint a commission, consisting of not less than three nor more than five persons, all of whom shall be physicians, and one at least, if possible, an expert in insanity. They shall examine the accused, hear the evidence that may be offered touching the case, and report their proceedings to the judge, with their opinions respecting his mental condition. If it be their opinion that he is not insane, he shall be brought to trial; but if they consider him insane,

or are in doubt respecting his mental condition, the judge shall order him to be placed in some hospital for the insane, or some other place favorable for a scientific observation of his mental condition. The person to whose custody he may be committed, shall report to the judge respecting his mental condition, previous to the next term of court; and if such report is not satisfactory, the judge shall appoint a commission of inquiry, in the manner just mentioned, whose opinion shall be followed by the same proceedings as in the first instance.

15. Whenever any person is acquitted, in a criminal suit on the ground of insanity, the jury shall declare this fact in their verdict, and the court shall order the prisoner to be committed to some place of confinement, for safe keeping or treatment, there to be retained until he may be discharged in the manner provided in the next section.

16. If any judge of the highest court having original jurisdiction shall be satisfied, by the evidence presented to him, that the prisoner has recovered, and that the paroxysm of insanity in which the criminal act was committed, was the first and only one he had ever experienced, he may order his unconditional discharge; if, however, it shall appear that such paroxysm of insanity was preceded by at least one other, then the court may, in its discretion, appoint a guardian of his person, and to him commit the care of the prisoner—said guardian giving bonds for any damage he may commit; *Provided, always,* That, in case of homicide, or attempted homicide, the prisoner shall not be discharged unless by the unanimous consent of the Superintendent and the managers of the Hospital, and the court before which he was tried.

17. If it shall be made to appear to any judge of the Supreme Judicial Court, or other high judicial officer, that a certain insane person is manifestly suffering from the want of proper care or treatment, he shall order such person to be placed in some hospital for the insane, at the expense of those who are legally bound to maintain them.

18. Application for the guardianship of an insane person shall be made to the judge of probate, or judge having similar

jurisdiction, who, after a hearing of the parties, shall grant the measure, if satisfied that the person is insane and incapable of managing his affairs discreetly. Seasonable notice shall be given to the person who is the object of the measure, if at large, and if under restraint, to those having charge of him; but his presence in court, as well as the reading of the notice to him, may be dispensed with if the court is satisfied that such reading or personal attendance would probably be detrimental to his mental or bodily health. The removal of the guardianship shall be subjected to the same mode of procedure as its appointment.

19. Insane persons shall be made responsible, in a civil suit, for any injury they may commit upon the person or property of others—reference being had in regard to the amount of damages to the pecuniary means of both parties, to the provocation sustained by the defendant, and any other circumstance which, in a criminal suit, would furnish ground for mitigation of punishment.

20. The contracts of the insane shall not be valid, unless it can be shown, either that such acts were for articles of necessity or comfort, suitable to the means and condition of the party, or that the other party had no reason to suspect the existence of any mental impairment and that the transaction exhibited no marks of unfair advantage.

21. A will may be invalidated on the ground of the testator's insanity, provided it be proved that he was incapable of understanding the nature and consequences of the transaction, or of appreciating the relative values of property, or of remembering and calling to mind all the heirs-at-law, or of resisting all attempts to substitute the will of others for his own. A will may also be invalidated on the ground of the testator's insanity, provided it be proved that he entertained delusions respecting any heirs-at-law, calculated to produce unfriendly feeling towards them.

The Steward reports the following articles as the result of farm and garden operations :

and 5

25½ bush. Beets,	50	-	-	\$12 75
1½ " Beans (green)	1 00	-	-	1 50
9½ " Beans (dry)	4 00	-	-	38 00
10 " Cucumbers (green)	1 50	-	-	15 00
4 bbls. Cucumbers (pickle)	5 00	-	-	20 00
487 bush. Corn,	40	-	-	194 80
204 heads Cabbage,	6	-	-	12 24
600 " Celery,	8	-	-	48 00
20 " Cauliflower,	10	-	-	2 00
119 bush. Carrots,	50	-	-	59 50
10 tons. Corn Stalks,	2 50	-	-	25 00
9½ bush. Green Peas (pods)	1 00	-	-	9 50
55 bunch. Lettuce,	5	-	-	2 75
7300 qts. Milk,	5	-	-	365 00
302 bush. Oats,	60	-	-	181 20
19 " Onions,	90	-	-	17 10
2½ " Parsnips,	1 00	-	-	2 50
405 " Potatoes,	50	-	-	202 50
56 bunch. Pieplant,	10	-	-	5 60
110 Pumpkins,	5	-	-	5 50
30 bunch. Spinach,	10	-	-	3 00
302 Summer Squash,	8	-	-	24 16
10 tons Oat Straw,	2 50	-	-	25 00
5½ bush. Tomatoes (ripe)	75	-	-	4 16
1 bbl. Tomatoes (pickle)		-	-	5 00
205 bush. Turnips,	30	-	-	61 50
2½ " Winter Radish,	75	-	-	1 80
Value of Pork slaughtered for Hospital use, 2000 lbs, 160 00				

\$1605 16

Farm Stock and Implements on hand: 3 Horses, 4 Cows, 10 Fat Hogs, 16 Pigs, 1 Farm Wagon, 1 Buggy, 1 Lumber Sleigh, 1 Cutter, 1 Set Double Harness, 1 Set Single Harness, 2 Plows, 2 Cultivators, 1 Harrow, Grain Cradle, Scythes, Hoes, Rakes, Shovels, etc., etc.

When it is remembered that only thirty-five acres of the farm were under cultivation it will be seen that the above was a pretty fair yield. All these articles we would have

had to purchase, and as the labor was principally done by patients, just so much was saved to the Institution. Much more might have been accomplished if the patients had been on the farm; but as they are a mile distant, much time was consumed in going and returning. A large number of the patients express a desire to work, and there are few who are not benefitted by a few hours labor a day. The garden was a perfect success, and the work was nearly all done by several quiet patients, under the direction of Frank Dunn, our Supervisor, to whose interest and unwearying diligence we are indebted for the successful operation of the farm. Day after day he would start out with from six to ten men with their hoes or other necessary implements, and all seemed to take pride in what they accomplished.

The matron makes the following report of new articles made in the house for the patients:

Bedquilts,	-	-	-	-	-	10
Shirts,	-	-	-	-	-	72
Draw Ticks,	-	-	-	-	-	35
Shirt Cases,	-	-	-	-	-	64
Bowels,	-	-	-	-	-	71
Living Room Towels,	-	-	-	-	-	42
Medicine Towels,	-	-	-	-	-	14
Bedclothes,	-	-	-	-	-	45
Shirts,	-	-	-	-	-	33
Shirts,	-	-	-	-	-	40
Shirts Knit,	-	-	-	-	-	22
Shirts,	-	-	-	-	-	48
Shirts Drawers,	-	-	-	-	-	14
Shirts Ties,	-	-	-	-	-	36
Shirts Suits,	-	-	-	-	-	8
Shirts Kerchiefs,	-	-	-	-	-	72
Shirts,	-	-	-	-	-	75
Shirts Dresses,	-	-	-	-	-	15
Shirts,	-	-	-	-	-	8
Shirts,	-	-	-	-	-	13
Shirts Canton Flannel Wrappers,	-	-	-	-	-	17
Shirts Canton Flannel Drawers,	-	-	-	-	-	23

Chemises,	-	-	-	-	-	-	74
Night Caps,	-	-	-	-	-	-	19
Under Waists,	-	-	-	-	-	-	5
Camisoles,	-	-	-	-	-	-	6
Ladies' Hose,	-	-	-	-	-	-	18
Ladies' Collars,	-	-	-	-	-	-	8
Under Skirts,	-	-	-	-	-	-	5

The above list forms but a small fraction of the needle work performed in our household. The repairing of worn garments, and the putting together of torn ones, or as one of the ladies facetiously termed it, the "reconstruction" of scattered fragments, requires hours of patient toil from the attendants assisted by many of the industrious patients, who spend much of their time in this way. Under the immediate supervision of the matron, the strictest economy has been exercised. Nothing is wasted. The few rags that have accumulated being carefully preserved and cut up for rags carpeting, which will some time afford good covers for the floors of the convalescent halls of our new buildings.

During the pleasant weather the female, as well as the male patients, spend much of their time in the airing yard; there all work is suspended. But during these cold winter days of indoor life many of them give valuable assistance in the various departments of labor, and from this they themselves derive the greatest benefit, for their minds being thus occupied over something useful, will be diverted from themselves. To one unaccustomed to asylum life, it may seem that with our corps of help the labor must be easy; but it must be remembered that a patient in a proxysm of excitement will often do mischief that will take hours to rectify. Thus far the matron has not had a sewing girl or assistant, which has necessarily made her labors very severe; but with heroic devotion she had always performed her arduous duties cheerfully.

In behalf of the reading portion of the household committed to my care, I must express, to the Board of Trustees, our appreciation of their liberality in making an appropriation for the benefit of the library. It consists now of nearly

any volumes, of a miscellaneous character. It may not be out of place to say here, to all persons of a philanthropic turn of mind, and charitably disposed, and having a superabundance of books, or literature of any description, as pamphlets, magazines or other illustrated papers, that any contributions—small favors—will be thankfully received and gratefully appreciated by a large number of our patients.

At present our facilities for furnishing amusements and diversion for the inmates are exceedingly limited. It is very desirable that a certain class of patients should have something to divert their minds from brooding over themselves and their real or imaginary troubles and sufferings.

Many of them enjoy an interesting book just as much as parties out of the hospital; while others are pleased and soothed by looking through a picture book or by examining an illustrated paper. The patients very seldom look at the contents of a paper if they are only interesting, it makes no difference if they are old.

I will also avail myself of this opportunity to express our grateful sense of obligation to the proprietors of the different newspapers who furnished their publications gratuitously to the Hospital. We have received, regularly, copies of the St. Paul Daily Pioneer, Minneapolis Tribune, Winona Democrat, Wabashaw Herald, Minnesota Folkeblatt, North-Folkeblad, Chatfield Democrat, North-Western Chronicle, &c. Beside these our special thanks are due to the St. Peter Tribune and St. Peter Advertiser, not only for their own issues, but also for the large number of their exchanges they have sent us every week.

The patients frequently inquire for the local papers of the place they came from, as they generally feel a great interest in the news from their own County. There are a large number of papers throughout the State that have not yet favored us with copies gratis. Our household would be under lasting obligations if more of the papers would favor us. It was quite amusing to see the amount of interest the patients manifested in the result of the late election. In our little republic, as everywhere else, there were two polit-

ical parties, and the patients have their preference for their own party papers.

I desire also to record my most grateful acknowledgments to Mr. Geo. W. Dryer, the Steward, and to Mrs. Mary L. Pexton, the Matron, for their uniform cordial co-operation, and for the generous support they have continually afforded me in carrying on the affairs of the Institution. Although the main responsibility rested upon me, they have invariably done all they could to alleviate the arduous duties connected with my office. Their long experience among the insane has rendered them eminently qualified to perform the duties connected with their several departments. They have uniformly manifested a spirit of devotion to the good cause—the amelioration of suffering—and the welfare of the unfortunate class who are confided to our care.

Numerous changes have taken place among the employees during the year, but those who have been with us, have invariably been prompt in the performance of their duties, and have in every respect acquitted themselves in a commendable manner.

I desire, gentlemen, to express my grateful appreciation of the confidence reposed in me, and to thank you, and each of you, cordially for the advice and encouragement continually afforded me; and I assure you I will gladly resign the trust so unexpectedly devolving upon me, into the hands of the Superintendent elect, with the consciousness that I have tried to do what I considered for the good of the Institution. Your liberality and personal kindnesses to me are my proofs that you have appreciated my humble efforts.

In the month of August we sustained a very serious misfortune in the loss of the Superintendent, who was removed by the hand of Death. In him passed away the organizer of this Institution, at the very dawn of a career of usefulness. In him is lost not merely a useful member of Society, not merely one of the noblest members of our noble profession, but one who had with commendable zeal devoted his life to the amelioration of physical and mental suffering, and who was ready to sacrifice himself to the cause of humanity.

I hope, gentlemen, you may have been wise and fortunate in your choice of a successor.

In closing this Second Annual Report, it behooves that I should commit this good work, for the year upon which we are just entering, to the kind care and keeping of Him who rules and presides over all.

Respectfully submitted,

JACOB E. BOWERS.

Acting Medical Superintendent.

SUPERINTENDENT'S REPORT.

To the Board of Trustees of the Minnesota Hospital for Insane:

GENTLEMEN :—The recent date of my connection with this hospital* does not enable me to speak from personal knowledge of its affairs during the year now closed; neither is it necessary to enter on any discussion of the statistics and general history of the past. The assistant physician, and since the death of Dr. Shantz, acting superintendent, Dr. J. E. Bowers, having so fully and ably presented the facts to you in his report, it would be a work of supererogation to rehearse further the details of business with which you in a great measure are already personally familiar. It is right however, in this connection, for me to say that you have evidently made use of all the means within your power, consistent with a due regard for present economy and future necessity, to render the patients as comfortable as possible in buildings constructed mainly for other and widely different purposes, and under a pressure for admittance so great as to crowd all the departments beyond reasonable bounds of accommodation. Attending this crowded state of the day-rooms and dormitories, are *many* inconveniences and *some* dangers. Among the latter, sickness from want of proper and sufficient ventilation, and disastrous consequences in case of fire may be mentioned as imminent. Of the four deaths reported as caused by typhoid fever, two of them appear to

* Dr. C. K. Bartlett, entered upon his duties as Superintendent, Dec. 20th, 1868.

have taken the disease after their admission; and six others had the same fever in a severe form but survived. It may not be improper to state here, that during a residence of ten years in a properly constructed hospital in one of the eastern States, under a strict hygienic regimen, not one fully developed case of typhoid fever was seen among an average household of four hundred persons; while at the same time the disease was frequently prevalent and fatal in the same town.

The recent total destruction by fire of the State Hospital at Columbus, Ohio, accompanied by loss of life, is a serious warning to all having charge of such institutions to leave no means within their power unemployed, to prevent if possible, a similar catastrophe. As one precautionary measure of defence against such an accident I would recommend the purchase of one or more "Fire Extinguishers," to be kept in some convenient and accessible place ready for immediate use.

The frequent applications for the admission of patients, and the delay which is necessary on account of present numbers, and the unfinished condition of the permanent building, claim your earnest attention. I know it has been your constant aim and endeavor to prepare, with all possible dispatch, proper and safe accommodations for all the unfortunate cases demanding your sympathy and care. That you have thus far provided prudently, is evident. "It is the first step that costs." That step has been manfully taken. To those having the authority to support and aid you further in this noble and humane undertaking, it is your privilege and consolation to apply.

The first section, with the return wing, of the permanent building, is in a forward state of construction. To finish and prepare it for occupancy is an object devoutly wished for. In order to do this, it will be necessary to supply power, means of lighting, heating, household furniture, and suitable buildings, with appurtenances, for carrying on the necessary cooking and laundry operations. If the walls of the centre building are erected during the coming season

and the lower story finished, it will afford all the necessary room for immediate wants.

Water.—First in order, and of the highest importance, is provision for a copious supply of wholesome water. If the well in the cellar does not prove sufficient in quantity and satisfactory in quality, there are on the farm, and entirely under your control, springs of pure, soft water (said to be never failing) sufficient for the requisite demand. How to raise this, either into iron tanks in the attic of the building, or to a reservoir on the grounds in the rear of the Hospital, is a question requiring immediate attention. Having examined similar works of other hospitals, I do not hesitate to recommend, as the most certain and economical arrangement under the present circumstances, that a suitable well be prepared to receive the contents of the springs, and that near it be placed steam apparatus and a pump to force the water through pipes to a basin on the bluff, at a sufficient height to supply the several halls of the Hospital. If at any future period, as the wants of the institution increase, it should become expedient to bring the water to the reservoir from some higher points, thus ensuring a supply without the aid of machinery, the pipes will be in position, the steam apparatus will then be needed for heating purposes, and the force-pump only will remain to be disposed of, without probably any material loss.

Heating Apparatus.—The time for determining the mode of heating will soon be at hand. It is a settled question, I presume, so far at least as hospitals for insane and this climate are concerned, that steam at high pressure is the only safe and reliable means of maintaining thoroughly and uniformly the requisite degree of temperature in cold weather. There are various kinds of boilers and radiators; a choice must be made among them and due regard paid to their economy and safety, as well as to their capacity to accomplish the necessary result. At the new city hospital recently erected in Boston, Mass., and at the State House in the same city, tubular boilers with horizontal radiators are in use and said to be satisfactory. At the State Hospital in Connecticut, also recently erected, Root's boilers and Gold's radiators are

in successful operation. With the simplicity of the latter boilers I was favorably impressed. They are said to be perfectly safe as to explosion;—if so—this fact alone is sufficient against all minor objections, to recommend their adoption. They are said to require close attention because of the rapid evaporation of water. This argument demonstrates their economy. The small space they occupy, the facility by which they can be made of any dimension, and repaired when necessary, are novel features in their construction. There may be difficulties connected with their use that do not appear on slight examination; but their simplicity and alleged safety combined with their evident economy in the use of fuel, certainly challenge a fair investigation of their merits before purchasing any other.

Furniture.—The furniture should be *special*, as no other, on the whole, is suitable. It should be strong, simple in form, and durable. For the lower halls only a few articles except bedsteads and stationary seats will be required. For the upper and convalescent halls, furniture resembling that in ordinary use in comfortable households may be allowed, and will be more home-like and acceptable to those approaching recovery.

It may appear to those who have not thoroughly examined the subject that you are making large provision for the insane of the State, and that you will have surplus room when the centre building with the two sections and returns are completed; but no one need be disturbed by the fear of too much room. In a State of this size and so rapidly growing in population, wealth and all the means of comfortable living, there will always exist a large class of patients whose friends will seek, when necessary, places where they can enjoy the comforts to which they have been accustomed at home. If provision is made for this class of patients the institution will receive not only the pecuniary benefits of their presence, but its character will be elevated in every respect. This is not a trivial matter. In one of the Hospitals of an Eastern State the income last year from private patients was upwards of thirty thousand dollars. A large portion of this sum was paid by patients from Western

States, many of them coming hundreds of miles, because there was no room for them in Asylums nearer home, or, at least, not such as their friends desired to obtain and pay for. If, then, comfortable provision is made for such patients here, they will not seek distant places, at great expense and exposure of travel, but remain nearer their friends and acquaintances, relieving, in a measure, the burdens of the State Treasury by so much as would otherwise be contributed to Institutions in other States.

GENTLEMEN:—You have been pleased to honor me with your confidence in appointing me Superintendent of your Institution, and I have accepted the trust, not in ignorance of the labor, trials and responsibilities to be anticipated by so doing. A successful administration of all the affairs of such an Hospital, new, and in process of construction, requires constant vigilance and unremitting care. Much depends upon the character and peculiar tact of those employed, both officers and attendants, and on their general harmony of action. I hope and believe, from all I have observed, that this household is fortunate in this respect. To Dr. Bowers, from whom I received directly the charge of the Hospital, I am under great obligation for a cordial reception and for his intimate knowledge of the history of the institution. To the Steward, and Matron, both officers of experience, I shall look with equal confidence for information and assistance in their several departments; and to you, as Trustees, for such generous support as your deep and abiding interest in this work inspires. Let us hope good things are in store for this benevolent enterprise. An auspicious beginning, though not without one *great shadow*, has been thus far successful. With a firm faith in the goodness of Him who protects and blesses, we enter upon the duties of a new year.

ST. PETER, Dec. 24th, 1868.

CYRUS K. BARTLETT, M. D.,

Superintendent.

THIRD ANNUAL REPORT

OF THE

BOARD OF TRUSTEES AND OFFICERS

OF THE

MINNESOTA HOSPITAL FOR INSANE,

TO THE GOVERNOR OF THE STATE OF MINNESOTA,

FOR THE YEAR 1869.

PRINTED BY AUTHORITY.

SAINT PAUL:
PRESS PRINTING COMPANY.
1870.